'Sakit Tuan' (Male Sexual Dysfunction): Axiological Notes on Malay Wisdom

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Abstract: 'Sakit tuan' (male sexual dysfunction) is a Malay term that refers to erectile dysfunction, diminished libido, and premature ejaculation. Malay traditional medicine possesses its own repertoire of remedies for these andrological conditions. Among the practices employed is the use of wafak (amulets or talismans). The sources of Malay medical wisdom examined in this study include classical texts such as Tajul Muluk, Kitab Hukum Jimak, Kitab Tib Pontianak, and Hikayat Nurul Lisan Menjawab Masalah, alongside a contemporary corpus derived from Malay traditional practitioners. The study reveals that the medical wisdom embedded in these texts is grounded in a Malay weltanschauung deeply shaped—either directly or indirectly—by Shi'i and Sufi thought. This body of knowledge constitutes a value system unique to the Malay intellectual tradition, one that stands in contrast to the epistemological framework of Western medical science. It is this axiological framework that underpins the field of Malay medicine. From this premise, Malay traditional treatment demonstrates a distinct advantage in its incorporation of spiritual elements of Islam, such as Qur'anic supplications (doa) and ritual chants (jampi). This highlights the central role of religion in the therapeutic approaches to sakit tuan, positioning faith not merely as an adjunct but as a constitutive element of healing.

Keywords: Male Impotency, Andrology, Sex, Amulets, Islamic Medicine, Shi'ism

1. INTRODUCTION

Among Malay men today, the discussion on 'sakit tuan' is given less exposure and attention compared to 'sakit puan' (female sexual dysfunction). According to Zulkifli Mohd Zainuddin, a urology consultant at the Urology Unit of the Surgery Department at the National University of Malaysia's Medical Centre, factors such as self-ego cause "some men tend to not share their problems with anyone, especially private problems such as sexual dysfunction and masculinity". In addition to "self ego", the study of Low Wah Yun, Siti Norazah Zulkifli, Wong Yut Lin and Tan Hui Meng (Low, 2004) shows that men feel shy or embarrassed to discuss the problem of sexual dysfunction that they suffer from:

"Most men with sexual problems are ashamed or embarrassed about their dysfunction and are reluctant to discuss the issue with their doctors. They may perceive the dysfunction as an inadequacy, and rather suffer in silence than risk exposure of this perceived inadequacy (Low, 2004)."

'Sakit tuan' is defined by Mohd Ismail Tambi (Tambi, 1995), one of the renowned andrologists in Malaysia, as "a disease and dysfunctional problem found in the male reproductive organs". In this case, the disease can occur on the "penis, testicles, testicular ligament and other related limbs". Among the problems often referred to in this context are "impotency, erectile dysfunction, loss of penile rigidity, and delayed or premature ejaculation". Mohd Ismail Tambi's explanation is also supported by the European Association of Urology (EAU) which states that sexual dysfunction usually refers to impotency or the medical term of erectile dysfunction and premature ejaculation (Wespes et al., 2002).

According to the definition of modern medicine, erectile dysfunction is the inability to maintain penile erection for the purpose of sexual intercourse so as to result in dissatisfaction to the sufferer (Feldman et al., 1994). Othman et al. (Othman et al., 2014) in turn associated impotence as never experiencing erection in a lifetime; or no longer experiencing erection; or the penis is erect only in the morning and when waking up from sleep; or the penis is able to be erect but not with a sexual partner; or the penis is semi-erect with the sexual partner; or the penis is erection is temporary with a sexual partner; and lastly the penis is aroused and erect when with a partner but it takes a long time to do so. Othman et al., formulated the definition based on his study by referring to medical experts such as Lionel Jacobs, David Woodhouse, Ted Keogh and Chris McMahon. Meanwhile, the problem of premature ejaculation is defined by The International Society for Sexual Medicine (ISSM) as a man's inability to withhold ejaculation, which is usually or almost always within 1 minute after the penis enters the vagina; as well as the inability to delay ejaculation each time or almost all the time after penile insertion in the vagina; thus resulting in anxiety, mental disorders, sexual frustration and the avoidance of sex and intimacy because of the problem (McMahon et al., 2008). Premature ejaculation is also often referred to as secondary erectile dysfunction, which among others, is caused by largely psychological issues such as limited sexual experience, excessive level of sensuality, excessive level of arousal, deterioration of sexual desire and hypersensitivity of the skin of the penis when rubbed with the contractions of the inside walls of the vagina (Paick et al., 1998). In other words, compared to primary erectile dysfunction, premature ejaculation as secondary dysfunction occurs as a result of firstly, psychogenic factors that can be addressed with psychological therapy or learning of sexual techniques. Secondly, it occurs due to biological factors such as penile hypersensitivity that can be

addressed, for example, with the intake of supplements or the use of certain creams (McMahon et al., 2004). In addition to erectile dysfunction and premature ejaculation, the problem that seems to be close to the problem of 'sakit tuan' is the infertility of the sperm or male semen which results in the occurrence of barrenness. When compared to erectile dysfunction and premature ejaculation, infertility is considered more serious by modern medical practitioners because it causes a human crisis that is both emotional and physical. This is because having an offspring is one of the most fundamental activities for human beings (Wallach & Mahlstedt, 1985). According to Marcia C. Inhorn (Inhorn, 2004) infertility is defined as a failure to conceive after a year or more after trying, resulting in involuntary childlessness. In this context, male infertility occurs due to a small amount of sperm in the semen (oligospermia), poor sperm quality in semen (asthenospermia), defective sperm in semen (teratospermia) and absence of sperm in semen when ejaculated (azoospermia). Infertility does not necessarily mean that the sufferer has 'sakit tuan' such as erectile dysfunction and premature ejaculation; in fact, existing studies show infertile men have a normal and good sex life. However, infertility causes stigma in society because the sufferer does not succeed in proving his manhood because of the lack of offspring (Inhorn, 2004). One of the questions that arises is how did the previous Malay men face and solve the problem of 'sakit tuan' that plagued them? What are the forms of treatment available in Malay traditional medicine for manhood and 'sakit tuan'? To questions, this paper will highlight only one answer the above two form of treatment, namely the use of wafak. Before the above questions are answered and clarified, it should be noted that in general, andrologists reject traditional Malay treatments as a solution to sexual dysfunction. The sceptical attitude shown by modern medical practitioners, for example, can be seen in the view of Dr Mohd Ismail Tambi (Tambi, 2005) who states:

"It is time for men to change their attitude of silence about their health problems and take positive actions, which is to seek a professional such as a doctor and not a masseuse or 'quack' or buy medicine or tools from those who are not qualified to solve the problem."

The presence of modern treatments has eroded the confidence of the Malays—in this context of men—towards traditional healing. A. Samad Ahmad (Ahmad & dan Pustaka, 1982), a Malay manuscript researcher who also studies manuscripts related to Malay traditional medicine, expressed his concern that traditional healing will be lost forever:

"One thing that is really sad about Malay traditional medicine, is the knowledge that resides in the shamans and *bomoh* themselves. Their

knowledge was not built on and developed. Furthermore, it is rarely documented; it was only passed down orally to their grandchildren or to someone who was considered a disciple. So when a shaman or bomoh dies, a portion of the medicine in his knowledge that has not been passed on, is buried with him. As a result, the knowledge on Malay traditional medicine declines as time passes, causing symptoms that will lead to its demise (Ahmad & dan Pustaka, 1982). The discourse on traditional medicine, grounded in culture and belief, vis-à-vis the philosophy of modern medicine continues to be a subject of heated debate, one that is far from unfamiliar and unlikely to dissipate. It is within this framework that the present paper examines a range of classical Malay manuscripts as case references, approaching them from this particular perspective. The hermeneutical interpretation of these manuscripts is necessarily informed by the value system of the Malays themselves, in which all ethnographic elements are to be taken into consideration. Through this methodology, the study seeks to illuminate the complexity of the Malay worldview, with its distinctive constellation of values, which differs markedly from those found in other civilizations. Accordingly, this paper seeks to examine the values or axiological system of the premodern Malays, taking as its focal field of inquiry the discourse on male sexual health. Such an approach not only provides a pathway toward understanding how the Malay philosophical framework of values was embedded in everyday life, but also demonstrates its manifestation across cultural products such as classical manuscripts and the use of wafaq (talismanic diagrams). This endeavor is, of course, inherently challenging, insofar as it requires engagement with the framework of cultural relativism. As mentioned earlier, this paper will not venture into the controversy of whether traditional treatment is effective or not compared to modern treatment. Instead, it intends to look at how Malay men of previous generations treated the disease and the forms of treatment available in Malay traditional medicine relating to the problem of 'sakit tuan'. In an effort to find an answer, several related matters pertaining to weltanschauung in the field of Malay medicine and sources of Malay local wisdom with regards to 'sakit tuan', will be discussed. Before delving into the use of wafak, this paper will touch on three related subtopics, namely i) the Malay value system; ii) the role of healers or bomoh and Malay thought on medical aspects; and iii) several issues under the subject of Malay sources for local wisdom.

2. THE MALAY VALUES SYSTEM

Within Malay culture and its system of values, religion plays a profoundly

significant role in all dimensions of life, including matters of medicine and health. This is also evident in the domain of sexual health. In earlier Malay discourse—often unconsciously—discussions on sexual health, particularly in relation to men, reveal a close connection with concepts and practices associated with Shiʻi belief. Axiology is a disciplinary category that concerns the study of values. According to Nurul Azizah and Rosyida Nurul Anwar (Azizah & Anwar, 2021), values serve as guiding principles in life, to the extent that individuals are willing to make sacrifices—even to the point of risking their lives—in order to defend them:

"Etymologically, axiology comes from axios (Greek) meaning "value," and logos meaning "science" or "theory." Axiology is therefore a theory of value. The values in question are those about which human beings make various judgments and considerations. Values are abstract realities that function as driving forces or guiding principles in life. They occupy such a central position in human existence that people are more ready to sacrifice their lives than to abandon values."

In the context of this paper, the discussion of axiology is situated within the framework of Shi'i Islam. Within Shi'i thought, the highest value is vested in the figure of the Imam, regarded as the rightful successor to the Prophet Muhammad after his death. According to Shi'i belief, the Imams are those uniquely endowed with the authority to interpret the Qur'an and to safeguard the integrity of Islam against deviation. In the Twelver (Ithnā 'Asharī) tradition, it is held that there are twelve such Imams, beginning with 'Alī ibn Abī Ṭālib and culminating in the Twelfth Imam, al-Mahdī, who is presently in occultation and expected to reappear at the end of time. For the Shi'a community, therefore, all values within worldly existence ultimately return to the discourse on the presence and role of the Imams in human life (Musa, 2020). These values are manifested in virtually every aspect of Malay approaches to medicine and healthcare, wherein prayers (doa) or incantations (mantera) employed to treat illness or infirmity often invoke the names of the Imams. Moreover, such practices—closely bound to the mystical realm—are also expressed through specific numbers and symbolic values, frequently materialised in the form of wafaq (talismanic diagrams), which will be elaborated upon later in this study. Nevertheless, prior to the coming of Islam, the Malay community had already been shaped by pre-Islamic belief systems. The encounter between these earlier cosmologies and Shi'i thought subsequently produced a distinctive local synthesis of values, one that is both hybrid and unique to the Malay cultural-religious landscape. Those who assumed the role of healers, possessing expertise in the use of *mantera* (incantations) and *doa* (prayers), were most often venerated saints (*wali*), and in certain contexts, traditional shamans or medicine men (*bomob*).

3. BOMOH AND THE MALAY WELTANSCHAUUNG

Malay traditional treatment is often be associated with the role and function of the bomoh, tabib, dukun or pawang [known as Malay shamanistic doctor or healer]. Kamus Dewan gives the same meaning to bomoh, tabib, dukun and pawang, that is, craftsmen or inventive people who treat the sick by using incantations and traditional medicine (Kamus, 2000). However, Mohd Taib Osman (Osman, 1984) mentions in detail that a pawang taps on the powers of the supernatural when treating a patient compared to a bomoh whose expertise lies in curing the sick. He also noted that these two terms are interchangeable and overlapping. Jahid Sidek (Sidek, 2004) agrees with Mohd Taib Osman's opinion that the culture of turning to shamans to solve life problems and diseases was inherited from the Hindu tradition which was the religion of the Malays before the advent of Islam. After the coming of Islam, those who acted as shamans continued to be referred to and given an important position in daily life until today. In the context of this traditional healing, the Royal Professor Ungku Abdul Aziz Ungku Abdul Hamid (Hamid, 2002) insisted that the weltanschauung or worldview of shamanistic healing should be viewed differently than modern treatment., According to him, this is because the "Malay mind continues to remain closer to the world of spirits and other worldly beings than we realise", that is, the Malay mind is closer to the supernatural world compared to the natural world. Although traditional Malay treatment is associated with supernatural aspects and the influence of Hinduism, it is difficult to ignore the presence of Islam in the daily way of life of the Malays. In many cases, the traditional perspective of Malay treatment became increasingly divergent when compared to modern treatment after the introduction of Islam. The supernatural elements mentioned by Ungku Abdul Aziz became more solid with the presence of Islam:

"Eventually, when the Malay community accepted and embraced Islam, in order to add more efficacy and effectiveness to the spells and some of the mantras that continued to be used, they were prefaced by the following words: 'Bismillahirrahmanirrahim' [in the name of Allah, Most Merciful, Most Compassionate], and ended with the words: 'With the blessings of the word Lailahaillallah Muhammadarrasululah' [There is no god but Allah, Muhammad

is the Messenger of Allah]. Among the spells, there were forms of prayer, excerpts from the holy verses of the Qur'an, from the Hadith of the Prophet. Similarly, most of the spells do not miss asking for approval from *Allah subhanahu wa ta'ala* [God, the Most Glorified, Most High]; seek intercession from the Prophet Muhammad and prophets who were message-bearers, from the Angel Gabriel; seek blessings from the Righteous Companions, and saints such as Rijalal Ghaib, Lukmanul Hakim and others. The miracle of spells and prayers play a big role, not only in the field of healing, but also as something that is believed to aid *mustajab* (acceptance) and generate more impact in producing whatever is intended in the heart or desired by a person" (Ahmad & dan Pustaka, 1982).

Ismail Hamid (Ḥāmid, 1986) states that spells are "a form of oral utterances that are sacred and magical in influencing the soul and becoming a link between the two realms'. The incantation and spells mentioned in the above paragraph are able to connect the natural and supernatural worlds since the *weltanschauung* of the Malays emphasises this aspect of the supernatural as an inner dimension. According to Zainal Abidin Borhan (Borhan, 1994), this inner dimension includes the life-spirit and soul, which are "the basic and most important energy or element that gives meaning to Malay spirituality, whether corporeal or not". Therefore, this inner dimension or supernatural concept is always tied to Islam because "Malay cosmology and Islam are no longer separated" (Borhan, 1994). Thus, the question no longer arises as to whether spells can be considered part of the practices allowed by Islam because with the presence of Islam, Malay traditional medical culture has also been reformulated from Buddhist-Hindu elements to monotheistic Islamic understanding.

Since Islam is alluded to as the core of Malay cosmology and weltanschauung, it should also be emphasised here that the epistemology of Islamic medicine is different when compared to modern medicine. According to Ibn Qayyim & al-Khaliq (Qayyim & al-Khaliq, 1957), a scholar famous for his work al-Tibb al-Nabawi, Islam categorises diseases into "disorders of the soul and spirit" as well as "disorders of the body". Disorder of the soul and spirit involves the faith and the need to return to the Almighty Creator. On the other hand, bodily disorders are divided into two other categories, namely diseases "without external needs" such as hunger being treated by eating or thirst whose cure is drinking water. The second category for bodily disorders requires the "special attention" of an expert. Ibn Qayyim also states that the medical tradition founded by Galen of Pergamon (or the Galenic tradition rooted in Greek epistemology) has

certain differences with Islamic medicine. For example, in discussing how to deal with high fever, Ibn Qayyim took into account the hadith (saying) of the Prophet (peace be on him) which states that "fever is from the fires of hell, so it can be relieved with water". This is, of course, different from the Galenic medical tradition which seeks to avoid the use of water in overcoming fever. Ibn Qayyim (Qayyim & al-Khaliq, 1957) further explained that the words of the Prophet (peace be on him) are metaphorical in an effort to remind Muslims of the punishment in the Hereafter (Ragab, 2009). However, this does not mean that the influence of Islamic medicine in Malay medicine is completely different from the Galenic tradition. Similarities between the Galenic and Malay-Islamic traditions, for example, can be found in an old manuscript numbered as MSS 1792 in the collection of the National Library of Malaysia. The text of Hikayat Nurul Lisan Menjawab Masalah (Piah, 2006) dated 1924 explains in detail the similarities between the causes of manhood disease that are very much related to his genitals, or more precisely, semen:

Translation by myself: "What is the origin of the son of Adam?' (The answer), the Word of Allah Almighty, '(Thumma ja'alnahu nutfatan fi qarar) until until (Fatabarakallahu ahsanul khaliqin) meaning' I made the Son of Adam from the nutfah (sperm) then made the sperm 'algah (blood) then made 'alqah the mudghah (lump of flesh) is then made into mudghah, the bone coated with flesh, so is its human nature formed, which enters into it the soul or life.' (Said the doctor), 'Where does the sperm come from and where does it reside?' (He replied), 'That which becomes sperm come from hot and wet food and that which makes the it ejaculate comes from thirtysix veins within the testicles of which comes from blood that boils to concentrated form and changes colour from red to white and its clump like wheat. So, when the thirty-six veins moved to a point of bursting, the limbs shook. '(Said the doctor), 'How many elements of the human nature. '(Answer)' Four, (i) water (ii) fire (iii) wind (iv) earth). '(The doctor said),' What is the degree of the four? '(He replied), 'The degree of water is cold and wet, that is balgham and the fire is hot and dry that is safra and the wind is hot and wet that is blood and the earth is cold and dry that is sauda. '(Said the doctor),' Where did the four elements come from'. (Answer), 'Of the nine things (i) food injury (ii) drink injury (iii) acts outside the body (iv) coming from time (v) change winds (vi) too much sleep (vii) lack of sleep (viii) too much motion (ix) lack of motion, that is, being restrained; then it becomes four (i) blood, its habit is hot and wet and its place is in the heart (ii) safara, that is, bile blood foam, its habit is hot and dry and it sits in the gall bladder (iii) balgham, that is, mucus, its habit is cold and wet and it sits

in the *celepung* (iv) *sauda*, which is the seat of blood, its habit is cold and dry, so its seat is in the *kura*. " (Piah, 2006).

The explication in Hikayat Nurul Lisan Menjawab Masalah shows the local wisdom of the Malays in preventing the causes of a disease, which if fully explored will lead to first and foremost the importance of a male sexual health. The above problem statement is not very different from what was presented in the Galenic system. It is known as 'humoral pathology'. Any treatment of a disease must first understand the pathology and its imbalance: The essence of Galen's system was humoral pathology. He held that all things were composed of different combinations of four elements: earth, air, fire and water, which embodied four primary and opposite fundamental qualities, hot, cold, wet and dry. Anything that was ingested was cooked by natural heat and transformed into different substances. Four humors or liquids resulted: blood, phlegm, black bile, and yellow bile. Balance among these humors created good health. Excess or defect of one humor or another gave rise to illness. Balance and various types of imbalance were categorized as different temperaments. Remedies for illnesses were sought in treatments thought to have an opposite effect. Thus if an illness were believed to result from imbalance toward cold and moist, it would be treated with drugs considered to be hot and dry. Other factors, such as sleep, emotional state, exercise, eating and drinking habits, evacuation and retention, and environment were also regarded as influential and were incorporated into the humoral system. Altogether this was a completely self contained system which could answer virtually any question about one's heatlh (Leiser & Al-Khaledy, 2004). The above paragraph, when compared with the paragraph from Hikayat Nurul Lisan Menjawab Masalah shows the similarities between the Galenic tradition and the Malay-Islamic tradition in determining the cause of a disease and the existing 'human habits' namely the four elements of water, fire, wind and earth. This may be due to early Islamic medical practitioners such as Abu Ali al-Husayn ibn Abd Allah ibn Sina (known by the Latin name Avicenna), Yuhanna ibn Masawayh (known by the Latin name, Mesue) and Abu al-Hazm al Quraishi Ibn al-Nafis were practitioners of the Galenic medical culture itself (Newman, 2007).

4. SOURCES OF MALAY WISDOMS

As mentioned in the previous sub-topic, one of the preserved manuscripts on traditional medicine is Hikayat Nurul Lisan Menjawah

Masalah. The manuscript is one example of a corpus of traditional Malay knowledge that is scholarly, in the form of education, and for understanding and practices as guidance for Malays in various aspects of life, including matters involving sex and healing. The corpus of Malay traditional knowledge in sex culture has two categories, namely i) written text, and ii) inherited oral tradition which is now scarcely recorded.

Two books or texts that Malays often refer to in order to make them understand aspects related to sex and medicine are *Tajuk Muluk* translated by Musa (Musa, 2014)(completed on 6 Muharam 1249 Hijrah) and *Kitab Hukum Jimak* translated by Ahmad bin Sulaiman Kamal Basha. According to Zamree Abu Hassan (Hassan, 2005) these two texts "influence the social life of the Malays, especially in relation to the beliefs, practices, and behaviors of sexual relations between husband and wife." However, it is difficult to be garnered since it is "transmitted orally" (Ibnu, 1993) and is revealed to "selective individuals" on the grounds of "unworthy of being discussed openly".

Even so, efforts to collect and document this "secretive knowledge" are still being carried out, mostly by traditional masseurs. Apart from Hikayat Nurul Lisan Menjawab Masalah, Tajul Muluk and Kitab Hukum Jimak, another medical manuscript that is often mentioned is Kitab Tib Pontianak which can be found at the National Library of Malaysia, and is numbered as MSS 2219. It is believed to have been written or copied in 1907 (Karim, 2006). It should be mentioned here, the book Tajul Muluk which also contains the knowledge of sexual intercourse and Malay sexual health treatment actually has a great Persian influence (Din, 2009). Mohd Taib Osman (Osman, 1983) asserted that the Persian influence was accepted by the Malays as a religious act. It is undebiable that Islam has a huge influence on the Malays such as on sexual healing, as discussed in the context of this paper. In addition to prayers, holy verses of the Qur'an, incantations and wafak, herbs and plants have significant uses in the treatment themselves or are pivoted to Islamic religious symbols to obtain keberkatan (blessings). This concept of blessing is very important in Islam because it can determine the cure of a disease. For example, one of the herbs that is often used in the treatment of sexual dysfunction is the root of the Tongkat Ali tree and the root of the Kacip Fatimah tree. In this regard, the author of Ibn Yusuf states:

"Malays (who are Muslims) know Siti Fatimah well and make her as an exemplary pious wife. The name Saidatina (or Sayyidah) Fatimah az-Zahra bint Muhammad (peace be on him) is better known as Siti Fatimah by the Malays, sometimes known only as Fatimah, but it means the same person.

Siti Fatimah is associated with a good role model, spousal loyalty, and even covers healing aspects. For example, Akar Fatimah or known as kacip Fatimah in Kelantan, Pahang and Perak (Labisia Pothoina) is very famous as a medicine for women's sexuality dysfunction and is used after childbirth. It is named after Siti Fatimah who is an ideal symbol of femininity. In fact, in the mantra practiced by a few Malay women in the past as one of the ways to take care of the vagina so that it is always narrow, dry and warm, it is invoked 'Siti Fatimah bears a *rawang rapat*'."

If women's sexual health is associated with Siti Fatimah, Malays often associate men's sexual health with Saidina Ali. It is not surprising if the root of Kacip Fatimah is used to treat female sexual dysfunction, while the root of Tongkat Ali is used to treat male sexual dysfunction. Even good male genital standards are attributed to Saidina Ali:

"The male genitalia are called Ali's Weapon by some; I massaged Ali's Weapon' and the firmness of the penis is imagined by the words 'firmly erect all over his veins' and 'standing erect tightly compressed veins and bone muscles' and it 'stands on its own' when orgasm prevails. The erected penis is symbolised by the life of the tongue; 'My tongue dieth not, nor shall you'. The erect penis is likened to iron; 'Hard as stone sharp as iron', and that means Khorsani (Kersani) Iron. To strengthen the penis, it is said that the Khorsani iron should be raised at the tip of the penis (Pucuk Kalam); 'If there's girth there's length; if there's length, there's penetration'. He (Saidina Ali) became the standard for the male weapon (penis), namely in terms of size, hardness, length of the penis and the size of the head of the penis. This is believed to stem from the belief that Saidina Ali had a gallant genital as gallant as he was on the battlefield, whereas no authentic record has been found on the matter in Islam. A penis that lasts during intercourse is considered a powerful penis and it is said that in ancient times Malay men were able to have sex from evening to morning. To withstand the duration of intercourse, the penis must be well erected, as this slows down the process of ejaculation; 'Hard spasm of all my joints, I wear strong Ali's core'. Semen is not easily ejaculated, and the sperm produced by the testicles is 'sent back to its original place'; 'Go back to the old palace' and 'go back to your palace'. The palace mentioned is the Palace of Sperm, which refers to the pelvic area in which the Chinese traditionally called it as a palace too (Ibnu, 1993)."

It is believed that by attributing these sacred names such as Fatimah and Ali to aspects of existing treatment, the supernatural powers or miracles present in them will mediate, or as a *wasilah* to healing. Among the Malays of the Syafi'e sect, the practice of *tawassul* (intercessionary prayers) and

hoping for *keberkatan* (blessings) has become a habit where the "saints of Allah" who are "high in their piety to Allah so that they are endowed with some *karamat* (sanctity) in life" are often used as a backup in every matter. In terms of curing diseases, the blessings and sanctity of holy people like Saidatina Fatimah and Saidina Ali are certainly expected by the patients. Undoubtedly, this also shows that there is a great Shi'a influence in traditional Malay healing:

"In the healing, usage of the book of *Tajul Muluk* and *Mujarabat* could be seen, including the mention of names such as Ali, Fatimah, Hussein, Hassan and Jaafar al-Siddik (Din, 2009)."

Vladimir Braginsky (Braginsky & Melayu, 1993) in his study entitled "Tasawuf dan Sastera Melayu: Kajian dan Teks-Teks" (Tasawuf and Malay Literature: Studies and the Texts" has suggested that in terms of status, Fatimah has achieved a high position compared to other holy women because Fatimah is not only the daughter of the Prophet (peace be on him) as the Logos, but Fatimah herself has given birth to the Logos, the Imams of the Shi'as. The concept of Logos is used in explaining the superiority of the Prophet Muhammad (peace be on him) as *Nur Muhammad* (Light of Muhammad) and as the *Insan Kamil* (Perfect Man) (Al-Attas, 1966). Because of her perfection as the daughter of the Logos i.e. Prophet Muhammad (peace be on him), and the mother of the Logos i.e. the Imams; Fatimah is also referred to by the Javanese in the text of *Nabi Wadon* as a female prophet or perfect woman (Mukherjee, 2005).

Therefore, it should be emphasised here that the position of Saidatina Fatimah and Saidina Ali is indeed rooted in the minds and views of the Malays in various ways so that in terms of sexuality, both are also models or guidelines to the "station (makam) of perfection". Thus, attaching the symbol of "sexual pleasure" to these two holy human beings is not something foreign, which is emphasised by Wendy Mukherjee (Mukherjee, 2005) as "Fatimah and Ali stand symbolically for the essence of male and female and it is their union which is re-enacted by every Muslim couple."

Such a great Shi'a influence in the daily life of the Malays (in the context of this paper is the traditional treatment of male sexual dysfunction) has also been alluded to by Mohd Taib Osman (Osman, 1987). According to Mohd Taib Osman (Osman, 1983) again, "prophets or figures such as Saidina Ali or Siti Fatimah are called as guardians of Nature or who have the power for immunity, sweeteners, etc." So it is not surprising that aspects of Malay sex and genital health are also attributed to Saidina Ali who is also the first Imam of the Shi'a community apart from Imam Jaafar Sadiq who is the sixth Imam in the teachings of Imamate Shi'ism. The

name of Imam Sadiq will be discussed further in the sub-topic on the use of wafak.

It is also possible that Saidina Ali's name is often referred to in the chapters on men's sexual health because of the tips or practices that he practiced. For example, the practice of eating *rumman* or pomegranate fruit which can "increase virility during sexual intercourse" is mentioned in *Hikayat Nurul Lisan Menjawab Masalah*. Saidina Ali also suggested eating *tamar* (dates) because "its property is that of hot and wet and its usage will give strength to the body and sexual desire and so from it will conception occurs (Piah, 2006)."

5. THE USE OF WAFAK

As briefly discussed in the sub-topic 'Sources of Malay Wisdom', traditional Malay treatment is strongly influenced by Shi'ite elements. Renowned anthropologist, Mohd Taib Osman (Osman, 1987) explains that among the most significant Shi'ite influences is what he refers to as "kekeramatan" (sanctity). According to him, the "elevation of a human being to a sacred status" is greatly influenced by the teachings of the Shi'ites who praise their Twelve Imams. In fact, the tendency of the public to visit the tombs of the saints for treatment is seen as a sign of the existence of Shi'ite culture among the Malay community. One of the sacred tombs that is often visited is the tomb of Habib Noh in Singapore who "is a descendant of Twelve Shi'ite Imams from the lineage of Saiyidina Ali" (Osman, 1987). One of the Shi'ite influences that can also be observed is the prayers attributed to Imam Jaafar as-Sadiq, the sixth Imam in the Twelver Shi'a doctrine. Among the Shi'ites, Imam Jaafar Sadiq is referred to as a scholar of medicine. There is a book among the Shi'a community called Tibb al-A'imma (Medicine of the Imams) which is associated with Imam Jaafar Sadiq. This book is a collection of statements by Imam Jaafar Sadiq recorded by Abu Atab Abd Allah and al-Husayn, who were the children of Bistam bin Sabur. Bistam was a companion of Abu Abd Allah Jaafar bin Muhammad al Sadiq or known as Imam Jaafar Sadiq (Newman, 2007). Roland Werner who recorded the medical methods practiced by the royal physician of Kelantan named Nik Abdul Rahman Nik Dir stated that one of the tawassul (intercession) prayers recited during treatment is the following:

"Ila hadratin Nabiyyil karimi zil khalqi wal khal qil 'azimi, Taha Muhammadin rasulullahi sallallahu 'alaihi wasallam, syai'un lillahi lahumul fatihah, wa ila arwahil anbiya'i wal (...) mursalin wal atqiya'i wal asfiya'i wan (...) wal abdali wal antadi wal (...) wal qutbi syai'un lillahil fatihah, thumma ila ruhi Saiyyidina Ja'faral Sadiqi radhiallahu 'anhu wa ila ruhiu shaikinia wa ustazina sahibu (...) syai'un lillahi lahumul fatihah." (p. 113-114)

The above prayer mentions the name of Imam Jaafar Sadiq and his name is used as a form of *tawassul* (intercession) to make a specific request, which in this context is to treat a disease. The question of *tawassul* has been briefly mentioned earlier. Apart from that, the use of garlic and eggs to treat low libido as discussed in the previous two sub-topics, can also be traced to *Tibb al-A'imma*. The book also recommends *andewi* (endive) for men who want a male offspring because *andewi* leaves thicken the semen, change its colour, and make the semen hot and viscous.

One of the forms of Islamic treatment associated with the Shi'a sect is the use of *wafak* (talismanic diagrams). Most of these *wafak* were collected by Abu Musa Jabir ibn Hayyan or known as al-Jabbar, a scientist in the field of chemistry. Jabir bin Hayyan was one of the followers and companion of Imam Jaafar as-Sadiq and is considered a Shi'a (Haq, 1994). The paragraph below describes Jabir bin Hayyan as the person who was first responsible for documenting *wafak*:

"The magic square (Arabic, *wafq*) is first documented in a group of writings attributed to Jabir b. Hayyan (known in Europe as Geber) and thought to have been compiled in the late ninth or early tenth century. From the twelfth century, manuals on magical formulas and (Blair, 2001)."

Wafak according to Kamus Dewan is completely different from what is meant in this paper which is "the time when something is bound to happen" (Kamus, 2000). However, the Kamus Dewan defines amulets as "items consisting of objects written on paper, cloth, certain pieces of wood, or anteater scales worn on certain parts of the body (such as the waist) that considered to have magic and can prevent are disease, misfortune and so on" (p. 79). The meaning of the word amulet is therefore more in line with the wafak meant in this paper. Mohd Taib Osman (Osman, 1987) is more comfortable using the word tangkal (talisman) to describe wafak which according to him "is written in the name of Allah, Muhammad and Ali which is used for purposes such as protection from evil spirits and black magic, gaining power and seeking material success." These talismans are entrusted to the saints because human beings need wasitah (intermediary) to "bridge the gap between God and man" (Osman, 1987). Mohd Taib Osman's view was also acknowledged by Peter E. Pormann and Emilie Savage Smith (Pormann & Smith, 2007) who state that the use of wafak was also supported by Ibn Qayyim al-Jawziyyah.

Both scholars also pointed out that Imam Ahmad bin Hanbal, one of the key figures of Ahlus Sunnah Wal Jamaah also recommended the use of wafak which contains selections from the holy verses of the Qur'an as well as sacred expressions (Peter E. Pormann and Emilie Savage Smith (Pormann & Smith, 2007)). This shows that wafak, amulets and talismans are not foreign to Islam. Abdullah bin Amr bin As even imposed amulets on his children who did not know how to read the holy verses of the Qur'an to protect them from any unseen evil. The amulets contained holy verses from the Qur'an. The Sufis among Ahlus Sunnah wal Jamaah also stated that the wearing or usage of amulets was widespread among the Companions of the Prophet (peace be on him) and companions of the Companion. One of the argument for the use of amulets is in the Qur'an itself, in verse 82 of Surah al-Israa', which reads: "We send down (stage by stage) in the Qur'an that which is a healing and a mercy to those who believe: to the unjust it causes nothing but loss after loss."

Both researchers, Peter E. Pormann and Emilie Savage Smith (Pormann & Smith, 2007) state that wafak is commonly considered to have magical or supernatural powers because it is a form of support or request to God to help and protect the wearer. Pormann and Savage Smith (Pormann & Smith, 2007) also state that these amulets or wafak are sometimes loaded with letters and symbols in the form of quadrants that are only understood by the person providing it or the shaman. According to Muhammad Abdullah as quoted by Ab Razak Ab Karim (Karim, 2006), wafak is a kind of formula of numeric symbols, or Arabic letters that are arranged at the appropriate time for a particular function. There are three types of wafak, namely wafak mutsalats, which is "wafak written in three boxes"; wafak mubarak, which is "wafak written in four boxes" and wafak mukhamas, which is "wafak written in five oval boxes". Each of these wafak is different because each box is written with a specific letter or number as a formula. The wafak is determined for various kaifiat (properties). The writing of the letters of mukhata'ah has value and is also a guardian among the angels or known as khadam masing-masing (servant of each one). For example, the letter alif is said to have a servant named Hathmatha Fayail.

The letters of *mukhata'ah* in the *wafak* boxes also have a certain value such as the letter *haa* which has a value of (= 5). According to R. Mackay (Mackay, 2007) the letter *haa* represents the Family of Prophet Muhammad (peace be on him) saw, as accepted by the Shi'as—"*Haa* (value = 5) representing the five individuals of Shi'a: Mohammad, Ali, Fatemeh, Hassan, Hussein". Knowledge of the values of these letters is called the Knowledge of the Alphabets and the Knowledge of Jafr. The use of letters in the

context of the Knowledge of the Alphabets is said to refer to "events or things that have happened" while the use of letters in the context of Knowledge of Jafr refers "to events or things that will happen". Both of these fields of knowledge are a "science taught by Imam Ali and Imam Jaafar as-Sadiq" to his students. This knowledge can be found in Shi'a literatures, especially the famous one entitled *Al-Kafi*.

One of the Malay medical books that contains knowledge on the use of wafak is the Kitab Tib Pontianak. The wafak are used to treat constipation, edema, erectile dysfunction and impotency. In the context of this paper, wafak to treat erectile dysfunction and impotency will be the focus. Wafak to strengthen the penis and increase the sperm content in semen are as follows:

Wafak to strengthen the penis and increase the semen is done firstly by writing on the millstone the following ingredients; 'Garlic, Javanese long pepper, paddy ginger which all have the same weight i.e. each. In addition, a cup of honey is included, and a cup of sesame oil.' These spices are grounded and put into a pan and cooked. While grinding, there is a wafak that should be written on the millstone. It is shaped in 'three forms of five stars arranged in sequence but the first star has three eared corners, while the other three corners do not have ears like the next two stars (Karim, 2006).

Wafak to strengthen the penis and to replace with the second semen is to 'take the egg yolk from three black chicken eggs, then get a piece of red onion, three pieces of garlic, seven ground white pepper and a little betel nut. The egg yolk is mixed with grated agarwood'. All these materials are put in a bowl, however the bowl should be drawn with a diagram or wafak 'in the form of a sequence of two stars that do not have ears and between the two stars is inserted a combination of the letters fa and wau' (p. 64-65). According to Roland Werner's study of medical methods practiced by the Kelantan royal physician named Nik Abdul Rahman Nik Dir, these Arabic letters are contained in the salawat (salutations) to the Prophet and his family members. Each letter carries a specific meaning. The letter fa means 'Allah prevents clashes with family members and relatives' while the letter wau means 'goodness and no evil from the Devil, given patience and success'.

Wafak to strengthen the penis and adding a third semen is the same as the second method but there is an additional letter or symbol written on the *wafak* that is 'the letter *ain* in the leftmost position, while the letters *fa* and *wau* that are joined are in the middle between the two stars' (Karim, 2006). The letter *ain* based on Roland Werner's field study means 'God will

facilitate and smooth out all difficult affairs as well as restore a person's health when he is sick or in a state of illness'.

Meanwhile, wafak to treat erectile dysfunction are as follows: The first wafak to treat penile weakness is to first prepare its medicinal ingredients namely 'red onion, Javanese long pepper, ground white pepper, nutmeg, ginger, salt, lampoyang, and assortment of rice. Take fourteen pieces of green chireta, a cup of sesame oil and a cup of water'. The ingredients are crushed and put into a bowl, or grinded on a stone that has been written or drawn with wafak as follows, 'the letter jim is in the first or rightmost position before the sequence of two stars in parallel' (Karim, 2006). The concoction should be consumed by the patient. Roland Werner states that the letter jim means 'patience is brought to every job, where each one is slow as long as it is safe.'

The second *wafak* to treat penile weakness is by 'preparing the ingredients first only and only then the *wafak* is written on the container used, or on the betel leaves'. The selected betel should be 'seven pieces of betel leaves with veins' and on each piece is written a *wafak* and then eaten for seven mornings. During this treatment the patient is forbidden to have sexual intercourse with his wife. The letters written are 'the letter *alif* seven times, the letter *ain* three times and the letter *tho* only once'. The letter *alif* should be in the rightmost position and in sequence of five times followed by the letter *ain* three times. The letter *alif* is repeated twice and followed by the letter *tho* and three stars on the leftmost (Karim, 2006).

Apart from the above *wafak* contained in the *Kitab Tib Pontianak*, there are also other *wafak* of Malay heritage that have been recorded. Usually, the *wafak* that exists are those written on a plate and water that pours from it are drunk in order to delay an ejaculation.

These wafak are just a part of the recorded wafak to treat existing sexual dysfunction. There are still many wafak or amulets that have not been recorded and are a secret to be revealed to certain men only. There are procedures for preparing the requested wafak. The wafak or amulets above should be "written on Friday which is at the time of dhuha (mid noon)" and "at the beginning of the Islamic month". While writing wafak, it is required to perform ablution, wear clean clothes, recite the basmalah ("In the name of Allah, Most Merciful, Most Compassionate") and make an intention in the heart to be "used for the happiness of the household".

As stated at the beginning of this paper, Islam views diseases not only as being caused by physical factors but also because of the presence of "Divine intervention, as well as the intervention of satan or jinn". In relation to that, it means that the treatment for diseases caused by gangguan

halus (supernatural disturbances) requires the support of treatment in a specific form involving certain "prayers, amulets and chants" (Newman, 2007). This makes traditional Malay treatment derived from Islamic sources different from modern medicine which treats patients based on factors that can be detected by the five senses.

6. BRIEF ANALYSIS

As has been shown in the previous sub-topics, the Malay-Islamic medical tradition still has similarities that can be linked to the modern medical tradition derived from the Galenic tradition. This, for example, was also found by a local pharmacologist, Jamia Azdina Jamal (Jamal, 2006) in her study:

"In Malay traditional medicine, the physical characteristics of a person are believed to be constituted of four elements - suprawi (fire), suddawi (earth), dammawi (wind) and balpawi (water). These elements, humours and descriptions of ailments are similar to those described by the Greek model of elements and humours. Besides chants (jampi), prayers (doa), massage, abstinence (pantang) and other practices, the Malay traditional medicine also utilizes various natural resources from plants, animals, microorganisms and minerals for the purpose of treating and preventing illnesses, and for rehabilitation and health promotion. Medications containing single or compound medicinal plants may be dispensed in many forms, such as powders, capsules, pills, makjun, medicated oils, simple distillates, decoctions, infusions, paste and poultices." (Jamal, 2006).

The above paragraph explains the advantages offered by traditional Malay-Islamic treatments that were derived from the natural environment while making full use of aspects of rehabilitation including prevention. In addition to treating bodily imbalances based on the four elements, namely water, fire, wind and earth; Malays also use prayers and spells.

Indeed, what can be discerned through the study of Malay sexual health traditions is how the framework of cultural relativism fundamentally challenges universalist claims. Moreover, the sources of value and knowledge within Eastern civilizations, when compared with the technological orientation of Western medicine, are profoundly complex and cannot simply be dismissed.

What emerges from this preliminary discussion is that the medical values and modes of thought of earlier societies—in this context, the Malays—possessed foundational principles and epistemic bases comparable to those

found elsewhere. The difference lies primarily in the evolution of technology and the maturation of human knowledge, particularly in the form of modern medical science.

As emphasized at the outset of this paper, these classical manuscripts must be interpreted through the intellectual framework of the Malays themselves. Scholars of Malay manuscripts have often been inclined to classify these so-called "magical texts" as "scientific manuscripts." Ungku Abdul Aziz Ungku Abdul Hamid (Hamid, 2002) underscores the importance of approaching the Malay weltanschauung as distinct from Western modes of thought. As he observes, "the Malay mind continues to remain closer to the world of spirits and other worldly beings than we realize"—that is, the Malay worldview is oriented more toward the metaphysical and unseen than toward empirical reality.

In this respect, the historian of Islamic occult sciences, Syed Nomanul Haq (Haq & Irwin, 2010), likewise affirms that "magical remedies" constitute part of Islamic medicine. They are not to be dismissed outright as mere magic but rather understood as a form of therapeutic "solution." This view is corroborated by Indriaty Ismail (Ismail, 2004) in her study of the Tajul Muluk. Indriaty demonstrates that the philosophy of occultism is widely traceable across classical Malay manuscripts. She further explains that occultism represents "an early science that focuses on the physical qualities inherent in things within the natural world—qualities that are difficult to apprehend through rational cognition, but which may be revealed through experience".

Unsurprisingly, such beliefs remain controversial when measured against Western criteria, where science and non-science are assessed primarily through what is empirically verifiable. By contrast, in the East—here, within the Malay tradition—science is construed as an abstract value, frequently rooted in religion, mediated by its practitioners, and, as demonstrated, often attributed to saints (wali) or to the Imams within Shi'i thought.

7. CONCLUSION

'Sakit tuan' is a disease that is often suffered by men. It includes erectile dysfunction, low libido and premature ejaculation. Malay wisdom in treating sexual dysfunction is, among others, by the use of *wafak* for healing. According to Mohd Taib Osman (Osman, 1977), there is no clear and distinct separation between modern and traditional medicine among

the Malays. Haliza Mohd. Riji (Riji, 2000) who studied in detail the culture of traditional Malay medicine in his book *Prinsip dan Amalan Dalam Perubatan Melayu* concludes that Malay medicine is a healing culture based on Islamic philosophy and thought by utilising the surrounding natural environment, in addition to appealing to the experience of healers and *bomohs*, or more precise, Malay practitioners of traditional medicine. The advantage of Malay-Islamic medicine in comparison to modern medicine is the combination of treatment with the spiritual aspects.

This Malay wisdom is stored in various old manuscripts, most of which have not been studied. Old manuscripts such as Tajul Muluk, Kitab Hukum Jimak, Kitab Tib Pontianak and Hikayat Nurul Lisan Menjawab Masalah are just a small part of Malay medical knowledge contained in Malay manuscripts that have not been excavated. It is believed that there are "22,000 copies of Malay manuscripts worldwide" (Hafizah Iszahanid, 2012) and only a small number are found in Malaysia. One of the contributions of knowledge through this study is that Malay wisdom in its written form was mostly influenced by Persian-Shi'a doctrines and Sufism, either directly or indirectly. Earlier Malay medical practitioners used the Ahlul Bayt of Rasulullah (Family of the Prophet) as an aid for healing. Apart from written form, Malay wisdom in relation to sexual dysfunction was transmitted orally among Malay medical practitioners for generations. To prevent further lost of Malay medical knowledge of the past, a thorough field study should be done in addition to systematic documentation. Beyond the micro-level discussion of male sexual health as reflected in traditional texts, there arises the broader necessity of integrating traditional modes of thought-often framed within the domains of occult science and religion—with modern medical knowledge. Although technology and human society have advanced, there remain enduring values that continue to resonate and retain relevance, bridging the past with the present. This also underscores the profound implications of philosophical encounter between Western and Eastern value systems, encompassing medical ethics as well as diverse cultural practices. It is by no means a loss to engage with older systems of value or with alternative epistemologies rooted in local cultures, for these can contribute meaningfully to the cultivation of civilization and human flourishing. In this regard, the intellectual and spiritual offerings of earlier generations ought not to be dismissed but revisited and critically assessed for their efficacy. While certain elements of the axiological framework may have evolved over time, its foundational orientation has largely remained constant: the pursuit of human well-being and the advancement of human dignity.

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